• :	*				M	_	4	Approved to	or use thro	ugh 7/31/2008 (O/SB/06 (08-03) DMB 0651-0032
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Substitute for Form PTO-875											
			AIMS AS FILED - PART I (Column 1) (Column 2)				SMA	ENTITY			R THAN ENTITY
	. FOR:	NUMB	ER FILED	LED NUMBER EXTRA]	RATE	FEE		RATE	FEE
(37	IC FEE CFR 1.18(a))					j		\$	OR .		s
	AL CLAIMS CFR 1.16(c))		minus 20	ius 20 = *			x \$=		OR	X \$=	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		MS	minus 3) = *		1	x \$=		OR	X \$_ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					1	+s =		OR	+5 =		
* If the difference in column 1 is less than zero, enter "0" in column 2.					J.	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											
\rangle	XI24107						/		OR		R THAN
V		CLAIMS	· ·	HIGHEST	T \	1	SMAUL I		1	SMAUL	ENTITY.
AMENDMENT /		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PAESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RAȚE	ADDI- TIONAL
	Total (37 CFR 1.16(c))		Minus	00	- X		× \$=		OR	× 5	
	Independent(37 CFR 1.16(b))	- 3	Minus -	"3		<u> </u>	X \$=		OR	× \$=	
A	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDI	ENT CLAIM (2) CF	R 1.16(d))		+:_=		OR	+\$ =	
						7	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT B		CLAIMS .REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=		X \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))		Minus	***	= .		· · · X \$=		OR	x \$=	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$ =		OR	+s =	
	•						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDİ- TIONAL . FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	= .		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=		s =		OR	x \$=	
ĕ	FIRST PRESENT	ATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1.16(d))		+5 =	·	OR	+ 5 =	
TOTAL TOTAL ADD'L FEE OR ADD'L FEE											
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.